## DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEIVED

JUN 2 4 2008

Form (RF-3)

SUMMARY SHEET

SPRINGFIELD, ILLINOIS

	Change in Company's premium or rate	e level produced by rate revision effective	09/04/08
	(1)	(2)	(3)
	Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
		<del></del>	
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		0.40/
3.	Liability Other Than Auto	771,144	-0.1%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
_		Water Samueland and Samueland	
		ritories) or certain classes? If so, specify:	
No.	Applies to all classes.		
Drief (	description of filing. (If filing follows rat	tes of an advisory organization, specify orga	anization):
1454L	this filing we are revising rates b	ased on ISO revised loss cost filing GL	-2007-RGI 1 and revising our
		ased of 130 revised loss cost ming OL	-2007-DOET and Tevising Car
IOSS	cost multipliers.		
	to real and real real residence of congress		
	djusted to reflect all prior rate changes hange in Company's premium level w		
·· ·	esult from application of new rates.	men wiii	
16	esuit from application of new rates.		
			•
		American Econo	my Insurance Company
			Name of Company
		Patty McCollum	n, Assistant Vice President
		<del></del>	Official – Title

H29219D

Form	(RF	-3)
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JUN 2 4 2008

Change in Company's premium or rate level produced by rate revision effective

	(1)	(2) Annual Premium	SPRINGF(E) D. ILLINOIS Change (+ or -)**
	<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto	1,803,882	0.9%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	filing only apply to certain territory (ter Applies to all classes	rritories) or certain classes? If so, specify	
With	description of filing. (If filing follows rand this filing, we are revising rates be cost multipliers.	ates of an advisory organization, specify on assed on ISO revised loss cost filing (	organization): GL-2007-BGL1 and revising our

Adjusted to reflect all prior rate changes. Change in Company's premium level which will result from application of new rates.

American States Insurance Company Name of Company

Patty McCollum, Assistant Vice President Official - Title

•	Change in Company's premium or rat	te level produced by rate revision effective	7/1/08
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger		
2.	Commercial Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$1,434,164	-4.1%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does f	iling only apply to certain territory (to	erritories) or certain classes? If so, specify:	
No			
Brief o	description of filing. (If filing follow	s rates of an advisory organization, specify	organization):
_Adop	otion of ISO revised loss costs and inc	s rates of an advisory organization, specify creased limit factors found in filing designate to revised loss cost moltins on OF INSTATE OF ILLINOISES.	tion numbers GL-2006-BGL1
and (	GL-2006-IALL1, respectively, subjec	t to revised loss cost military in the late	
	***	STATE OF ILLINOIS	URANCE
		L'ECE!	
		es.	
	hange in Company's premium level w	which will MAY 3 0 20	08 l
re	sult from application of new rates.	1	
		SPRING	
		SPRINGFIELD, ILL	INDIS
		Finnir	yers Mutual Casualty
		Comp	
			Name of Company
		Don (	Coughennower
			ant Vice President
			Official - Title
			CITIVIOL LINV

SUMMARY Form (RF-3) Change in Company's premium or rate level produced by rate revision (1) Percent Annual Premium Change (+ or -)\*\* Volume (Illinois)\* Coverage **Automobile Liability** 1. Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 0.8% 1,556,186 Liability Other Than Auto 3. 4. **Burglary and Theft** 5. Glass 6. **Fidelity** 7. Surety 8. **Boiler and Machinery** 9. Fire **Extended Coverage** 10. 11. Inland Marine Homeowners 12. 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No. Applies to all classes. Brief description of filling. (If filling follows rates of an advisory organization, specify organization):

With this filing, we are revising rates based on ISO revised loss cost filing GL-2007-BGL1and revising our loss cost multipliers.

\* Adjusted to reflect all prior rate changes.

Change in Company's premium level which will result from application of new rates.

> First National Insurance Company of America Name of Company

Patty McCollum, Assistant Vice President Official - Title

	Change in Company's premium or rate	e level produced by rate revision effective	09/04/08
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto	895,175	1.6%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
		ritories) or certain classes? If so, specify:	
No.	Applies to all classes.		
Brief	description of filing. (If filing follows rat	tes of an advisory organization, specify orga	inization):
		ased on ISO revised loss cost filing GL-	2007-BGL1and revising our
IOS	s cost multipliers.		
		DIVISION OF INSURANCE	
* /	Adjusted to reflect all prior rate changes	S. I CTATE OF ILLINUIS/IDET 1	
** (	Change in Company's premium level w	hich will RECE!VED	
- 1	result from application of new rates.		
		JUN 2 4 2008	1
		General Insuran	the Company of America
		General Insurar SPRINGFIELD, ILLINOIS	Name of Company
		SFRINGI ILLEY	James or Company

•	Change in Company's premium or rat	te level produced by rate revision effective	7/1/08
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger		
_	Commercial	0.000.001	2 504
3.	Liability Other Than Auto	\$5,082,304	-3.5%
4.	Burglary and Theft		
5.	Glass	***	
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Toes f	iling only apply to certain territory (t.	erritories) or certain classes? If so, specify:	
No	ining only apply to certain territory (i	entiones) of certain classes. It so, specify.	
Brief o	description of filing. (If filing follow	s rates of an advisory organization, specify of	organization):
		creased limit factors found in filing designat	
and (	GL-2006-IALL1, respectively, subjec	t to revised loss cost multipliers.	
	djusted to reflect all prior rate change		
	hange in Company's premium level w	hich will	
re	sult from application of new rates.	50	
	•	DIVISION OF INSURANCE	
		STATE OF ILLINOIS/IDEPR  MAY 3 0 2008  Compa	
		VED	EN CARCO I
		MAY 9 Illings	s EMCASCO Insurance
		MAY 3 0 2008 Comp	Nome of Constitution
			Name of Company
		SPRINGE	
		SPRINGFIELD, ILLINOIS	
			Coughennower
			ant Vice President
	•		Official - Title
			311101W1 11110

# RECEIVED

JUN 1 6 2008

IDFPR (MPC) DIVISION OF INSURANCE SPRINGFIELD

## Form (RF-3)

#### SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 06/11/08 (3) (2) (1) Percent **Annual Premium** Volume (Illinois)\* Change (+ or -)\*\* Coverage Automobile Liability Private Passenger Commercial Automobile Physical Damage 2. Private Passenger Commercial \$67951 +6% Liability Other Than Auto 3. 4. Burglary and Theft 5. Glass **Fidelity** 6. 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage Inland Marine 11. Homeowners 12. Commercial Multi-Peril 13. 14. Crop Hail Other 15. Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Filing applies to all territories and all classes. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): To adopt ISO"s prospective advisory loss costs for Commercial General Liability, the revised Increased Limits Factors,

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

and to amend our loss costs multiplier from .85 to .900 for Premises and Products.

Indiana Lumbermens Mutual
Insurance Company
Name of Company

onya J. Burroughs Compliance	
nalyst	
Official – Title	

## Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

## **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision

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JUN - 6 2008

DFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

	effective 10/01/2008	•	
_	(1)	(2)	(3)
-		Annual Premium	Percent
	Coverage	<ul> <li>Volume (Illinois) *</li> </ul>	Change (+or-) **
1.	Automobile Liability Private		
	Passenger	0	0
	Commercial	0	0
2	Automobile Physical Damag		
	Private Passenger	0	0
	Commercial	0	0
3.	Liability Other Than Auto	\$1,359,230	+7.5% (estimated)
4.	Burglary and Theft	0	0
5.	Glass	0	0
<b>3</b> .	Fidelity	0	0
7.	Surety	0	0
3.	Boiler and Machinery	0	0
€.	Fire	0	0
10.	Extended Coverage	0	0
11.	Inland Marine	0	0
12.	Homeowners	0	0
13.	Commercial Multi-Peril	0	0
4.	Crop Hail	0	0
15.	Other	0	0
	Life of Insurance		
•	Does filing only apply to cer Classes? If so,	tain territory (territories) o	r certain
		in Hardin, Madison, Monroe, St	Clair Counties;
	2. 10% in Cook County; and 3. 5% in the	e remainder of the state.	
	Brief description of filing. (If	filing follows rates of an a	advisory
	Organization, specify		
	organization):		yers professional liability base rate by:
			and 3. 5% in the remainder of the state.
	It also adds a new area of practice fa		area of practice
	*Adjusted to reflect all prior to the company's pre		ult from application of new
•	rates.		• • • • • • • • • • • • • • • • • • • •

Name of Company

Terry Bliss, CPCU, ARP Compliance Manager

Official — Title

(	Change in Company's premium or rate	level produced by rate revision effective	ctive 11/1/08
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
1.	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	14226	-10.2%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		<u> </u>
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
		'A - ' - ' - Y - '	6
oes i	iling only apply to certain territory (terr	itories) or certain classes? If so, spe	ecity:
Rrief c	description of filing. (If filing follows r	ates of an advisory organization, spe	ecify organization):
	re adopting ISO reference filing number	# DD 2008 DI A1	organization).
* A	djusted to reflect all prior rate changes.		•
* Cl	nange in Company's premium level whi sult from application of new CHASUR DIVISION OF ILLINOISIDE	ch will	
re	sult from application of new patricular	ANCE	
	DIVISION OF ILLINOISIE STATE OF ILLINOISIE		
		1	
	JUN 2 4 201	1 <b>8  </b>	
	JUN 2 4 20	, \	National Fire and Indemnity
	1		Exchange
		TINOI2	Name of Company
	SPRINGFIELD, II		
	-		Ann Hambins Vice Persits
			Ann Hawkins, Vice President, Attorney-in-Fact
		· <u>· · · · · · · · · · · · · · · · · · </u>	Official - Title
			Official - Title

3. 4. 5. 6. 7. 8. 9.

## Section 754.EXHIBIT A Summary Sheet (Form RF-3)

## FORM (RF-3)

#### **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision

	effective 08-01-2008	<del></del> •	
-	(1)	(2) Annual Premium	(3) Percent
-	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
	Commercial		
2	Automobile Physical Damag		
	Private Passenger		-
	Commercial		
3.	Liability Other Than Auto	2,455,268	+5.0
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		DIVISION OF INCLES
14.	Crop Hail		ATE OF ILLINOIS/IDER
15.	Other		DIVISION OF INSURAN STATE OF ILLINOIS/IDEPR
	Life of Insurance		JUN 0 3 2008
•	Does filing only apply to certa	in territory (territories) or	certain 2008
	Classes? If so,	in termory (termones) or	SPDING
	specify: No		SPRINGFIELD, ILLINOIS
	<u></u>		

Organization, specify

organization):

Brief description of filing. (If filing follows rates of an advisory

Revised manual page GLS-RR-1 08-01-2008 replaces GLS-RR-1 10-01-2007

SECURA Insurance, A Mutual Company Name of Company Daniel P Ferris - Official Official - Title

Reference ISO adoptions & LCM's are updated as shown.

<sup>\*</sup>Adjusted to reflect all prior rate changes.

<sup>\*\*</sup>Change in Company's premium level which will result from application of new rates.

Change in Company's premium		by rate
revision effective <u>7-1-200</u> (1)  Coverage	8 (2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other  Line of Insurance  Does filing only apply to certain 15 so, specify:	territory (territories)	-12.0
Brief description of filing. (If organization	<ul> <li>Adopting Insurance S Costs, Increased Lin Loss Potentials, Dec</li> </ul>	Services Office Loss mit Factors, Estimated ductible Factors, and e are also revising our ers.
		DIVISION OF INSURANCE
* Adjusted to reflect all prior r ** Change in Company's premium lev result from application of new	rel which will	JUN 1 3 2008
	Sentry Insurance a Mu	SPRINGFIELD, ILLINOIS
	Name of Comp	
Denn	is Homann-Compliance Develo	opment Senior Analyst

Form (RF-3)

4.4

#### SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective  $\frac{7-1-2008}{}$  .

(1)	(2) Annual Premium	(3) Percent Change (+ or -)**
Coverage	Volume (Illinois)*	Change (+ or -)**
<ol> <li>Automobile Liability         Private Passenger         Commercial     </li> </ol>		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	1300988	3.7
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain If so, specify:	territory (territories)or	certain classes?

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopting Insurance Services Office Loss Costs, Increased Limit Factors, Increased Limit Table Assignments, Estimated Loss Potentials, Deductible Factors, and ZIP

Territories. We are also revising our Expected Loss Ratios and Independent Rates.

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

JUN 1 3 2008

SPRINGFIELD, ILLINOIS

Sentry Select Insurance Compan

Name of Company

Change in	Company's	premium	or	rate	level	produced	by	rate
revision	effective	7-1-2008						

Tevision effective / 1 200		•
(1)	(2) Annual Premium	(3) Percent Change (Loral)**
<u>Coverage</u>	Volume (Illinois)*	<u> Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto	183.634	+19.3%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain	territory (territories)or	certain classes?
If so, specify: N/A to certain t	erritories. Applies to T	ruth-In
Lending/Leasing	Odometer & Prior Damage	and Title for
Auto/Truck/RV De		

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): THE PURPOSE OF THIS FILING IS TO REVISE OUR ERRORS AND OMISSIONS PREMIUM CHARGES.

after 7-1-2008

Amending flat charge premiums for the Truth-IN Lending/Leasing, Odometer & Prior Damage and Title for our Auto/Truck/RV Dealers market.

We ask for approval to be effective on or

- \* Adjusted to reflect all prior rate changes.
- \*\* Change in Company's premium level which will result from application of new rates.

Sentry	Select	Insurance	Company
	Name o	of Company	

Dennis Homann Compliance/Development Analyst Official - Title

# Form (RF-3)

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate le	evel produced by rate revision effective _	8/1/2008 for NB & 10/1/2008 for Ren.
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)</u> *	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto	\$47,964,429	20.0%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine 12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain territory (	territories) or certain classes? If so, spec	ify: <u>No</u>
	I diability umbrella	·
,	<i>71</i>	
Brief description of filing. (If filing follows	rates of an advisory organization, specif	ry organization): <u>increasing rates varying</u>
by coverage and class.		
*Adjusted to reflect all prior rate changes **Change in Company's premium level w	hich will result from application of new ra	tes.
	001.5	- Fine and Consults Consults
	State Fari	m Fire and Casualty Company Name of Company
	Gregory S. Girard -	Actuary & Assistant Secretary-Treasurer Official – Title

## Form (RF-3)

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate lev	el produced by rate revision effective	09/01/2008
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private     Passenger Commercial	\$0	0%
Automobile Physical Damage     Private Passenger Commercial	\$0	0%
3. Liability Other Than Auto	\$19,188,640	-1.13%
4. Burglary and Theft	\$1,539,684	0%
5. Glass	\$0	0%
6. Fidelity	\$6,327,970	0%
7. Surety	\$29,057,840	0%
8. Boiler and Machinery	\$0	_0%
9. Fire	\$0	0%
10. Extended Coverage	\$0	0%
11. Inland Marine	\$0	0%
12. Homeowners	\$0	0%
13. Commercial Multi-Peril	\$0	0%
14. Crop Hail	\$0	0%
15. Other N/A	N/A	N/A
Line of Insurance		
3) The addition of Health Care Organ	rates of an advisory organization, specify policy available within Travelers Casualty sociated with multi-year policies; a coverages considered in calculating the lization Directors, Officers and Trustees L	organization): This filing proposes the and Surety Company of America:  Coverage Combination Discount; and Liability and Health Care Organization
Employment Practices Liability co	verages to those available within the Wra	p+ package policy.
*Adjusted to reflect all prior rate changes. **Change in Company's premium level wh	ich will result from application of new rate	
		Name of Company
	Carol Ha	Carol Hall - Actuary
		Official - Title

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR

JUN 2 6 2008

SPRINGFIELD, ILLINOIS

1.	(1)	(2)	
1.		Annual Premium	(3) Percent
1.	<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
	Automobile Liability	,	
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	7768	+34.26
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
<b>15</b> .	Other		
	Line of Insurance		
Ines fi	ling only apply to certain territory (t	erritories) or certain classes? If so, specify:	
NO II	ting only apply to contain territory (		
Brief d	escription of filing. (If filing follow	s rates of an advisory organization, specify o	organization):
	t ISO's Loss Cost filing - Please see		
	ljusted to reflect all prior rate change		

\*\* Change in Company's premium level which will result from application of new rates.



Vanliner Insurance Company
Name of Company

Tina Kampwerth
Senior Compliance Coordinator
Official - Title

H29219D

Form (RF-3)	ILLINOIS DEPARTMENT OF INSUF SUMMARY SHEET	RANCE Revised eff
Change in Company's premiu	m or rate level produced by rate revision effective _	<u>-08/15/2008</u> 9/1/
(1)	(2) Annual Premium	(3) Percent
<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
1. Automobile Liability Private Passenger Commerce 2. Automobile Physical Dame Private Passenger Co 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other  Line of Insurance	e	37.0%
Does filing only apply to certa not applicable	in territory (territories) or certain classes? If so, spec	xify:
Brief description of filing. (If fil	ing follows rates of an advisory organization, specify	y organization): We propose the following
	sing Group from Title Agents of America to Ressura	ance,
(2)Adoption of minimum prem (3)Change in structure of Cla Abstractors/Searchers, and E	ss Particularities factors to be applied to the portion	s of business operations for Title Agents,
(4)Change in factor application	n for those that currently have and maintain an in-ho	ouse proprietary plant to apply only to the
portion of Title Agents and Ab	ostractors premium instead of total policy premium,	
(5)Change in factor application of Escrow Agents and Closing	on for those that use software for all escrow and clo g Agents premium instead of total policy premium,	sing activities to apply only to the portion
(6)Change in factor application of Escrow Agents and	on for those that use reconciliation software to ball Closing Agents premium instead of total policy premium instead of total	ance trust accounts to apply only to the mium.
Change (1) is a notification of	f the name change of the Purchasing Group and will	have no rate impact.

Change (2) is being made to unify the rating structure for all states. This structure is currently in place in 34 of the states. Based on our current book of countrywide policies, changes (2)-(6) are expected to produce an overall rate level impact of 37.0%.

Zurich American Insurance Company
Name of Company
Carole Amato - Analyst
Official - Title

<sup>\*</sup>Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.